

Discussion Document
Preliminary “Scoring” of Worker~Employer Choice Options per Criteria

Employer chooses <u>one</u> QHP = Option E						
Employer chooses “suite”; worker chooses QHP = Option D						
Possible “variation” on Federal: HMOs at one level, PPOs lower level = Option Cv						
(Federal) Employer chooses one level; worker chooses QHP = Option C						
Employer chooses 2+ levels; worker chooses QHP = Option B						
Worker can choose any QHP = Option A						
Criteria (“Degree of”) 1=worst, 5=best	Option A	Option B	Option C	Option Cv	Option D	Option E
Number of Choices Available to Workers	5	4	3	3	?	1
“Intelligibility” of Worker Choices	1	2	4	3	3	NA
Employer can just define contribution, leave plan choice to worker	5	3	4	3	3	-
Cost-Conscious Worker Choice of plan’s networks/provider systems	2	3	5	4	3	NA
Potential Adverse Selection / Risk Premium Cost	1	2	3	4	?	5
Similarity to Individual Exchange Options (Individual Continuity)	5	4	3	3	2	1
Differential Additional Burden on Exchange Administrative Systems (relative to system required for federal model)	4	4	5	5	3?	1
Similarity to Existing Small Employer Market/Systems	1	1	1	1	2	5